



S-28-04

Attorney Docket No.: Analog.5581

\$RCE
\$2644

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Sabouri et al.

GROUP: 2644

SERIAL NO: 10/056,558

EXAMINER: C.P. Tran

FILED: 01/25/2002

FOR: LINE INTERFACE WITH GAIN FEEDBACK COUPLED MATCHING
IMPEDANCEMail Stop RCE
Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED

JUN 03 2004

Technology Center 2600

Sir:

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

This is a request for Continued Examination (CE) under 37 C.F.R. §1.114 of the above-identified application.

1. Submission required under 37 C.F.R. §1.114

- a. ☒ Previously submitted
- i. ☒ Consider the amendment(s)/reply under 37 C.F.R. §1.116 previously filed on April 8, 2003
(Any unentered amendment(s) referred to above will be entered).
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- iii. ☐ Other _____
- b. ☒ Enclosed
- i. ☐ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☒ Information Disclosure Statement (IDS)
- iv. ☐ Other _____

CERTIFICATE OF EXPRESS MAIL UNDER 37 C.F.R. §1.10

I hereby certify that this Request for Continued Examination (RCE) Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service on May 27, 2004 in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number EV383580771US addressed to the: Mail Stop RCE, Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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770.00 OP

Emily C. Porell

2.

Miscellaneous

- a. ☐ Suspension of action of the above-identified application is requested under 37 C.F.R. §1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. §1.17(i) required)
- b. ☐ Other _____

3.

Fees

The RCE fee under 37 C.F.R. §1.17(e) is required by 37 C.F.R. §1.114 when the RCE is filed.

- a. ☒ RCE fee required under 37 C.F.R. §1.17(e): \$770.00
- b. ☒ Extension of time fee (37 C.F.R. §§1.136 and 1.17): \$110.00
- c. ☐ Other _____

4.

Fee Payment

- a. ☒ Check in the amount of \$880.00 enclosed
- b. ☒ The Director is hereby authorized to charge the above fees, or credit any overpayments to Deposit Account No. 19-0079.

Respectfully submitted,



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